

## **Desktop & Mobile Computing Justification (DMCJ) Form**

This form is intended for use to comply with the State Desktop and Mobile Computing Policy found in the State Administrative Manual (SAM 4989 et seq.).

Agency/Depa Contact Pers Contact Pers Request Title Total Cost:	son 1: son 2:	Tolonhono:	
Information T	t related to a previously approved Feasibil echnology (IT) Purchase?	· ·	
QTY		Description	
	e items listed above replacing existing item ncluding all the information on each item's		
во горіасса п	Item Description	Asset Tag Information	
NOTE: If this Justification for	request is for products that are <u>not</u> purchase or Purchasing Outside the IT Statewide Control	d through a mandatory Statewide Contract, please submit a act.	
Clearly descr productivity o	Justif ibe how this desktop and/or mobile computing rotherwise benefit the end user, work-group, es and alternatives. Discussion should addre	cation configuration or product is expected to increase or agency management; include both primary and ss any information technology security issues associated	

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Per SAM Section 4989 et seq., authority to acquire desktop and mobile computing commodities, including tablet devices, is delegated to Agencies/state entities that have the following:

- Acceptable Technology Recovery Plans or Technology Recovery Plan Certifications.
- Maintain compliance with all applicable state IT security provisions as defined in SAM Section 5300-5399, specifically sections 5350.1 Encryption, 5360.1 Remote Access, 5360.2 Wireless Access, and 5320.2 Security and Privacy Training.
- Appropriate plans for the use of desktop and mobile computing commodities as expressed in the Agency/state entities current Agency Information Management Strategy (AIMS) as defined in SAM sections 4900.2-4900.6.

## **Agency Chief Information Officer (CIO)**

By signing this form, I declare that I have no direct or indirect investments, real property or interest in any company, business, entity or organization that may involve this project or contract.

I certify that I am the agency chief information officer or designee, that the matters described herein are consistent with this agency's current information management strategy and information technology infrastructure; that these matters comply with this agency's approved Desktop and Mobile Computing Policy; that the matters described herein are subject to the provisions of the State Administrative Manual (SAM) Section 4819.3 et seq. and are in conformity with the criteria and procedures for information technology and security prescribed in SAM; and that the foregoing statements are true to the best of my knowledge and belief.

Chief Information Officer or Designee	Date Approved
Signature	

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